Please type a sign (+) inside this box $\implies \blacksquare$ PTO/SB/05 (03-01) Approved for use through 10/31/2002. OMB 0651-0032 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number 1383.0260001/EKS/BJD Attorney Docket No. UTILITY GEISSMANN et al. First Inventor PATENT APPLICATION Compositions and Methods for Use in Modulating... TRANSMITTAL Express Mail Label No. (Only for new nonprovisional applications under 37 CFR § 1.53(b)) Assistant Commissioner for Patents APPLICATION ELEMENTS Box Patent Application Washington, DC 20231 ADDRESS TO: See MPEP chapter 600 concerning utility patent application contents. 7. CD-ROM or CD-R in duplicate, large table or Computer Program Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) Applicant claims small entity status. See 37 CFR 1.27. a. Computer Readable Form (CRF) b. Specification Sequence Listing on: [Total Pages]()7] Specification (preferred arrangement set forth below) i. CD-ROM or CD-R (2 copies); or Descriptive title of the Invention
 Cross Reference to Related Applications ii. paper Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program listing appendix
 Background of the Invention Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS - Brief Summary of the Invention
- Brief Description of the Drawings (if filed) - Detailed Description Assignment Papers (cover sheet & document(s)) Claim(s)Abstract of the Disclosure 9. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney 10. Drawing(s) (35 U.S.C. 113) [Total Sheets English Translation Document (if applicable) 5. Oath or Declaration [Total Page 11. a. Newly executed (original or copy) Copies of IDS Citations Information Disclosure Statement (IDS)/PTO-1449 12. П b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) 13. Preliminary Amendment DELETION OF INVENTOR(S) 14. \boxtimes Return Receipt Postcard (MPEP 503) i. 🔲 (Should be specifically itemized) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§ Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. 1.63(d)(2) and 1.33(b). Application Data Sheet. See 37 CFR 1.76. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach 16. form PTO/SB/35 or its equivalent \boxtimes Other: Authorization under 37 C.F.R. § 1.136(a)(3) Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: ☐ Continuation-in-Part (CIP) ☐ Divisional of prior application No: _ ☐ Continuation Prior application information: Group/Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

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Customer Number or Bar Code Label Customer No. 26111 (Insert Customer No. or Attach bar code label here) NAME Sterne, Kessler, Goldstein & Fox P.L.L.C. 6 1 1	19. CORRESPONDENCE ADDRESS											
		or Correspondence address below	(Insert Customer No. or Attach bar code label here)									
				NAME STERNE, KESSLER,	NAME							
Attorneys at Law PATENT ,TRADEMARK OFFICE			PATENT TRADEMARK OFFICE	Attorneys at Law								
ADDRESS				ADDRESS	ADDRE							
CITY STATE ZIP CODE		ZIP CODE	STATE	CITY	CITY							
COUNTRY TELEPHONE FAX		FAX	TELEPHONE	COUNTRY	COUNT							

42,473 Registration No. (Attorney/Agent) NAME (Print/Type) Brian J. Del Buono SIGNATURE

Burden Hour Statement: this form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$) 1,546.00

respond to a conection of information diffess it displays a valid OMB control number						
Complete if Known						
Application Number	To be assigned					
Filing Date	HEREWITH					
First Named Inventor	GEISSMANN et al.					
Examiner Name	To be assigned					
Group Art Unit	To be assigned					
Attorney Docket No.	1383.0260001/EKS/BJD					

METHOD OF PAYMENT (check one)						FEE	CALCULATION (continued)		
1. The Commindicated fee	nissioner is hereby authorize s and credit any overpayme	ed to charge nt to:		TIONAL Entity	FEES Small	Entity				
Deposit Account Number	9-0036		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee D	escription	Fee paid	
Deposit Account Name	terne, Kessler, Goldstein & F	ox P.L.L.C.	105	130	205	65	Surcharge - late filing	fee or oath		
П.,			127	50	227	25	Surcharge - late provisiona	l filing fee or cover sheet		
Li Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17			139	130	139	130	Non-English specifi	cation		
☐ Applicant claims small entity status See 37 CFR 1.27			147	2,520	147	2,520	For filing a request for	or <i>ex parte</i> reexamir	nation	
See 37 CFR 1.27				920*	112	920*	Requesting publication of action	of SIR prior to Examine	r	
2. Payment Enclo	sed:		113	1,840*	113	1,840*	Requesting publication of	of SIR after Examiner a	ction	
1	redit card Money Ord or credit any overpayments in th and 3 below to Deposit Account	er Other* e fees or fee No. 19-0036.	115	110	215	55	Extension for reply w	ithin first month		
-	FEE CALCULATION		116	390	216	195	Extension for reply w	ithin second month		
1. BASIC FILING FE	E	·	117	890	217	445	Extension for reply w	ithin third month		
Large Entity Small			118	1,390	218	695	Extension for reply w	ithin fourth month		
Fee Fee Fee Code (\$) Code	Fee Fee Description (\$)	Fee Paid	128	1,890	228	945	Extension for reply w	ithin fifth month		
101 710 201	355 Utility filing fee	710.00	119	310	219	155	Notice of Appeal			
106 320 206	160 Design filing fee		120	310	220	155	Filing a brief in suppo	ort of an appeal		
107 490 207	245 Plant filing fee		121	270	221	135	5 Request for oral hearing			
108 710 208	355 Reissue filing fee		138	1,510	138	1,510	Petition to institute a	public use proceed	ing	
114 150 214	75 Provisional filing fee		140	110	240	55	Petition to revive - ur	navoidable		
SUBTOTAL /	1) (\$)	710.00	141	1,240	241	620	Petition to revive - ur	nintentional		
SUBTOTAL (1) (\$) 710.00			142	1,240	242	620	Utility issue fee (or re	eissue)		
			143	440	243	220	Design issue fee			
			144	600	244	300	Plant issue fee			
			122	130	122	130	Petitions to the Com	missioner		
2. EXTRA CLAIM FI	EES Fee from Extra below	Fee Paid	123	130	123	130	Petitions related to p	rovisional applicatio	ens	
Total Claims47	- 20** = <u>27</u> X <u>18.00</u>	= 486.00	126	180	126	180	Submission of Inform	ation Disclosure St	mt	
	dep. Claims 4 - 3** = 1 X 80.00 = 80.00 581 40 481 40 Recording each patent assignment per property (times number of properties)									
Multiple Dependent	270.00 =	<u>270.00</u> = <u>270.00</u> 146 710 246 355 Filing a submission after final rejection (37 CFR 1.129(a))								
Large Entity Small Fee Fee Fee	Fee Fee Description		149	710	249	355	For each additional is (37 CFR 1.129(b))	nvention to be exam	nined	
Code (\$) Code 103 18 203	(\$) 9 Claims in excess of 20		179	710	279	355	Request for Continue	ed Examination (RC	E)	
	40 Independent claims in 6		169	900	169	900	Request for expedite	d examination of a		
	 35 Multiple dependent clai 40 **Reissue independent 		Other fee	(specify) ·			design application			
110 18 210	patent 9 **Reissue claims in exc	ess of 20 and over	Other fee (specify):							
original patent Other fee (specify): SUBTOTAL (2) (\$) 836.00 *Reduced by Basic Filing Fee Paid										
Treduced by Dasic Filling Fee Faid							SUBTOTAL	(3) (\$)	_	
SUBMITTED BY					Complete (if app	licable)				
Name (Print/Type) Brian J. Del Buono Registration No. (Attorney/Agent) 42,473 Telephone 202-371-2600							202-371-2600			
Signature	Boll	Talle	\supset					Date	April 12,201	